Schedules A&B—Itemized Deductions AND (Form 1040) Interest and Dividend Income

Department of the Treasury Internal Revenue Service

Name(s) as shown on Form 1040

► Attach to Form 1040. ► See Instructions for Schedules A and B (Form 1040).

Your social security number

Schedule A-	-Itemized Ded	luctions	(Schedule B is on back)		
Medical and Dental Expenses (not paid o	r reimbursed by	y Con	tributions (See page 17 of Instructions.)		
insurance or otherwise) (See page 16 of In	structions.)		Cash contributions for which you have		
1 One-half (but not more than \$150) of in-	Î		receipts or cancelled checks		
surance premiums you paid for medical	•	1 1	Other cash contributions (show to		
care. (Be sure to include in line 10 below.) .			whom you gave and how much you		
2 Medicine and drugs . I			gave)		
3 Enter 1% of Form 1040, line 31			84467		
 		////			
4 Subtract line 3 from line 2. If line 3 is more than line 2, enter zero		_			
5 Balance of insurance premiums for medi- cal care not entered on line 1					
6 Other medical and dental expenses:					
a Doctors, dentists, nurses, etc					
b Hospitals		22 (Other than cash (see page 17 of Instructions for required statement)		
dentures, eyeglasses, transportation,		23 (Carryover from prior years		
	*		Fotal contributions (add lines 21a through		
etc.) >			23). Enter here and on line 36 >		l
		Cas	ualty or Theft Loss(es) (See page 18 of	Instructions.))
		25	Loss before insurance reimbursement .		
			Insurance reimbursement		
			Subtract line 26 from line 25. If line 26		
			is more than line 25, enter zero		
7 Total (add lines 4 through 6c)			Enter \$100 or amount from line 27,		
8 Enter 3% of Form 1040, line 31			whichever is smaller		
9 Subtract line 8 from line 7. If line 8 is			Fotal casualty or theft loss(es) (subtract line 28 from line 27). Enter here and on line 37.		
more than line 7, enter zero !			cellaneous Deductions (See page 18 of	nstructions.)	
10 Total medical and dental expenses (add				1	<u> </u>
lines 1 and 9). Enter here and on line 33.			Union dues		
Taxes (See page 17 of Instructions.) Note: Gasoline taxes are no longer deductible.		31	Other (itemize)		
<u> </u>	· ·				
11 State and local income					
12 Real estate		<u> </u>			
13 General sales (see sales tax tables)		_]			
14 Personal property					
15 Other (itemize) >					
			Total miscellaneous deductions (add lines 30 and 31). Enter here and on line 38 ▶		
16 Total taxes (add lines 11 through 15).			Summary of Itemized Deductions	5	A
Enter here and on line 34		<u> </u>	(See page 19 of Instructions.)		
Interest Expense (See page 17 of Instruction	ons.)	33	Total medical and dental—from line 10.		
17 Home mortgage		₃₄ ·	Total taxes—from line 16		
18 Credit and charge cards			Total interest—from line 20		
		_	Total contributions—from line 24		
19 Other (itemize)			Total casualty or theft loss(es)—from line 29 .		
			Total miscellaneous—from line 32		
			Add lines 33 through 38		
		_	If you checked Form 1040, Filing Status box:		
		— ^{#8}	2 or 5, enter \$3,400)		1
			2 or 5, enter \$3,400		
		— _{/1} ,	3, enter \$1,700		1
	-		and on Form 1040. line 33. (If line 40		
20 Total interest expense (add lines 17 through 19). Enter here and on line 35			is more than line 39, see the Instructions for line 41 on page 19.)		

Name(s) as shown on Form 1040 (Do not enter name and social security number if shown on other side)

Your social security number

Name of payer Amount Name of payer Amount Name of payer	Amount		
2 Total interest income. Enter here and on Form 1040, line 9			
Part III Foreign Accounts and Foreign Trusts			
If you are required to list interest in Part I or dividends in Part II, OR if you had a foreign account or were a grantor of or a transferor to a foreign trust, you must answer both questions in Part III. Please see page 19 of the instructions. 4 Total of line 3	B		
A At any time during the tax year, did you have an interest in or a signature or other authority over a bank account, securities account, or other financial account in a foreign country (see page 19 of instruc-			
tions)?	· · ·		
B Were you the grantor of, or transferor to, a foreign trust which evisted during the current tay year 1040, line 10a			
Make Winds California and California and Salaria distriction of the California distriction of th	butions for the year and		
If "Yes," you may have to file Forms 3520, 3520-A, you do not need Schedule D to reliable that schedule.	you do not need Schedule D to report any other gains or losses, do not file that schedule. Instead, enter 40% of your capital gain distributions on Form 1040, line 15.		